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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

IIIIC III	Idi Neveride del 1880	1 0016			open to rabile inspection
	calendar year 2016 or tax year beginning JUI	1, 2016	, and ending	JUN 30, 2017	
	me of foundation			A Employer identification	number
	HE LASSITER FAMILY CHARIT	TABLE			
	OUNDATION			46-1402786	
	mber and street (or P O box number if mail is not delivered to street	et address)	Room/suite	B Telephone number	
	750 N. STRATFORD ROAD	 .		404-520-82	84
_	y or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
	TLANTA, GA 30342				
G C	Check all that apply: Initial return		ormer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		2 Foreign organizations mo	ating the REN/ test
	Address change	Name change		Foreign organizations me check here and attach co	mputation P
<u> </u>	Check type of organization: X Section 501(c)(3)	•		E If private foundation stat	
<u> </u>	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)	(A), check here
	· \ ——	ting method: X Cash	Accrual	F If the foundation is in a (
		Other (specify)		under section 507(b)(1)	(B), check here
_		T		ļ	-
Ра	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
		1		income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	382,398.			
	2 Check if the foundation is not required to attach Sch B Interest on savings and temporary				
	3 cash investments	360 573	260 572	 	ama musicos and
	4 Dividends and interest from securities	268,573.	268,573.		STATEMENT 2
İ	5a Gross rents				
	b) Net rental income or (loss)	766,797.			CONTRACTOR 1
en	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 4,118,818.	700,737.			STATEMENT 1
Revenue	b assets on line 6a 4,118,818.	<u> </u>	996,351.		· ·
Be	7 Capital gain net income (from Part IV, line 2)		330,331.	H RECEIVE	D
	8 Net short-term capital gain 9 Income modifications			18 NOV 20 00	
	Gross sales less returns			불 NOV 2 0 20	7 9
	10a and allowances b Less: Cost of goods sold	 			
	c Gross profit or (loss)	 		 OGDEN, L	
	11 Other income				
	12 Total. Add lines 1 through 11	1,417,768.	1,264,924.	0.	
_	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits			 	
888	1				
e D	b Accounting fees STMT 3	3,150.	1,575.	0.	1,575.
and Administrative Expense	c Other professional fees STMT 4	53,543.	53,543.	0.	0.
ě	17 Interest			·	
rati	18 Taxes STMT 5	19,920.	0.	0.	0.
ist	19 Depreciation and depletion				
Ē	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
ğ	22 Printing and publications				
19 8	23 Other expenses STMT 6	102.	102.	0.	0.
Operating	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	76,715.	55,220.	0.	1,575.
0	25 Contributions, gifts, grants paid	521,550.			521,550.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	598,265.	<u>55,220.</u>	0.	523,125.
	27 Subtract line 26 from line 12:				
	Excess of revenue over expenses and disbursements	819,503.			
	b Net investment income (if negative, enter -0-)		1,209,704.		
	I a Adiustad antimagement	1	I	I	ı ————

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

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FOUNDATION

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year		End of year			
Pa	irt i	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
\neg	1	Cash - non-interest-bearing	299,455.	293,419.	293,419.			
1		Savings and temporary cash investments						
		Accounts receivable ►						
- 1		Less; allowance for doubtful accounts ▶						
		Pledges receivable						
- 1		Less: allowance for doubtful accounts			777777777777777777777777777777777777777			
	_	Grants receivable						
	-	•						
1	D	Receivables due from officers, directors, trustees, and other		\				
	_	disqualified persons						
l	7	Other notes and loans receivable						
		Less: allowance for doubtful accounts						
şt		Inventories for sale or use						
Assets		Prepaid expenses and deferred charges						
۲	10a	Investments - U.S. and state government obligations STMT 7	99,065.	0.	0.			
Į	þ	Investments - corporate stock STMT 8	7,724,478.	8,528,888.	9,803,123.			
	C	Investments - corporate bonds STMT 9	1,562,195.	1,664,922.	1,655,348.			
	11	Investments - land, buildings, and equipment, basis		~				
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other						
	14	Land, buildings, and equipment basis ▶						
		Less accumulated depreciation						
·	15	Other assets (describe ►						
	16	Total assets (to be completed by all filers - see the						
		ınstructions. Also, see page 1, item I)	9,685,193.	10,487,229.	11,751,890.			
	17				7			
	18	Grants payable						
S	19	Deferred revenue			•			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ΙĢ	21	Mortgages and other notes payable						
ت		Other liabilities (describe >	17,467.	0.	;			
	23	Total liabilities (add lines 17 through 22)	17,467.	0.	1			
_	Ť	Foundations that follow SFAS 117, check here			,			
		and complete lines 24 through 26 and lines 30 and 31.			4			
98	24	Unrestricted			!			
anc	25	Temporarily restricted						
3al	26	Permanently restricted			4 1 4			
둳	-*	Foundations that do not follow SFAS 117, check here						
Ξ		and complete lines 27 through 31.						
٥	27	Capital stock, trust principal, or current funds	0.	0.				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.1	0.				
Ass	29	Retained earnings, accumulated income, endowment, or other funds	9,667,726.	10,487,229.				
Net Assets or Fund Balance	30	Total net assets or fund balances	9,667,726.	10,487,229.				
Z	١		7,001,71201					
	31	Total liabilities and net assets/fund balances	9,685,193.	10,487,229.				
=								
P	art	Analysis of Changes in Net Assets or Fund B	alances					
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30					
		st agree with end-of-year figure reported on prior year's return)	[1]	9,667,726.				
2	•	er amount from Part I, line 27a		2	819,503.			
3		er increases not included in line 2 (itemize)	3	0.				
4		lines 1, 2, and 3		4	10,487,229.			
5		reases not included in line 2 (itemize)	-	5	0.			
6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	. 6	10,487,229.			
					Form QQA-PF (2016)			

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		sses for lax on in		income						
(a) List and descr 2-story brick wa	ibe the kin rehouse; o	d(s) of property sold (e.g., or common stock, 200 shs.	, real estate, . MLC Co.)		(b) I	low acc - Purch - Dona	quired hase tion	(c) Date a (mo., da	cquired ly, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES								VARI	วบร	06/30/17
b PUBLICLY TRADE						P VARIOUS 06/30				06/30/17
c CONTRIBUTED ST	OCK					I	D	12/0	9/16	03/22/17
d										
e					1					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis xpense of sale					ıın or (loss (f) mınus	
a 434,423.				304,63	8.					129,785.
ь 3,285,322.		_		2,664,98	6.					620,336.
c 399,073.				152,84	3.					246,230.
d					1				-	
е				-						
Complete only for assets shown	ig gain in c	column (h) and owned by t	he foundation	on 12/31/69			(1)	Gains (C	ol. (h) gaın	minus
(i) F.M.V. as of 12/31/69	()	j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			col.	(k), but n	ot less tha (from col.	n -0-) or
a										129,785.
b										620,336.
c										246,230.
d										
e										
	L	C If gain, also enter	un Dort I luna	7	$\overline{}$					
2 Capital gain net income or (net ca	ıpıtal loss)	$\begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases}$	in Part I, line · in Part I, line	7	}	2				996,351.
3 Net short-term capital gain or (los			d (6):		ار	1				
If gain, also enter in Part I, line 8,	column (c	:).			•				BT / 3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	مامد و	ection 4940(e) for	Doduces	Toy on Not	<u> [</u>	3 (ont Inc		N/A	<u> </u>
							Terri inc	Oille		
(For optional use by domestic private	e toungaud	ons subject to the section 4	1940(a) tax or	i net investment ir	ncom	e.)				
If section 4940(d)(2) applies, leave t	his part bla	ank.								
Was the foundation liable for the sec				•	rıod?					Yes X No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in	each colur		istructions be	fore making any e	_					787
(a) Base period years		(b)	tributions	Not value of pa	(C)) sitabla i		ı	Distri	(d) bution ratio
Calendar year (or tax year beginni	ng in)	Adjusted qualifying dist		Net value of no				(col. (b) divided by col. (c))		
2015			2,498.			<u> </u>	5,308			
2014			6,934.				4,629			.050335
2013			3,885.				1,654			.049509
2012		30	2,804.		9	<u>,93</u>	2,061	•		.030488
2011										
							• ••	2		.180058
3 Average distribution ratio for the	5-year bas	se period - divide the total o	on line 2 by 5,	or by the number	r of ye	ears				
the foundation has been in existe	nce if less	than 5 years						3		.045015
4 Enter the net value of noncharital	ble-use ass	sets for 2016 from Part X,	line 5					4	1	.0,985,912.
5 Multiply line 4 by line 3								5		494,531.
.,	•	•		•	•		•			
6 Enter 1% of net investment incor	ne (1% of	Part I, line 27b)						6		12,097.
	•	, ,	•	• •	•	•	••			
7 Add lines 5 and 6								7		506,628.
· ·				-						
8 Enter qualifying distributions from	n Part XII.	line 4						8		523,125.
If line 8 is equal to or greater that			th, and com-	 Diete that nart usu	nn a 1	% tav r	rate			
See the Part VI instructions.	, , , , ,	uio 201 ili i uit vi, iliio	,	oloto ulat part doll	.ya I	,0 WA I				
										5 000 DE (0040

THE LASSITER FAMILY CHARITABLE

	990-PF (2016) FOUNDATION		1402		F	age 4
	TVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see in	stru	ctior	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1	1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			ر در ددد مه		
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1	<u> </u>	1:	2,0	97.
	of Part I, line 27b	1				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3		12	2,0	97 .
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1:	2,0	97.
	Credits/Payments:					-
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 13,728	<u>.</u>				
þ	Exempt foreign organizations - tax withheld at source 6b	_	ļ			- 1
C	Tax paid with application for extension of time to file (Form 8868)	_				
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	_ 7		1	3,7	28.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1,6	
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				0.
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	e in			Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	u)s	. [1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed or	. [
	distributed by the foundation in connection with the activities.		l.	Ju		
C	Did the foundation file Form 1120-POL for this year?		Į.	1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ſ			
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$	•	1	ł	ĺ	1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_	ı		ļ	÷
	managers. ▶ \$ 0 .					400
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		Ł	2		X
	If "Yes," attach a detailed description of the activities.		Į	l	- [1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or	ı	,	_	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	[4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	[/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. [5		X
	If "Yes," attach the statement required by General Instruction T				- 1	1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:]]	1	
	By language in the governing instrument, or		4	Ī		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	te law			ı	
	remain in the governing instrument?		<u>l</u>	6	_X]	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X	v	[7	X	
			ſ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		
	GA			ļ	l	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar	İ			
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		į į	9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	<u> </u>		10		X
			Fore	200	DE	(2016)

Part VII-A Statements Regarding Activities (continued)	
	Yes No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	} }
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11 X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges	s?
If "Yes," attach statement (see instructions)	12 X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13 X
Website address ► N/A	
14 The books are in care of ► MARIANNE LASSITER Telephone no. ► 40	
Located at ► 3750 N. STRATFORD ROAD, ATLANTA, GA ZIP+4	▶30342
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	
and enter the amount of tax-exempt interest received or accrued during the year	N/A
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	Yes No
securities, or other financial account in a foreign country?	16 X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	
foreign country	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes No
1a During the year did the foundation (either directly or indirectly):	_
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	_ No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_
a disqualified person?	_ 1 1 1
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	_ No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No
(5) Transfer any income or assets to a disqualified person (or make any of either available	_
for the benefit or use of a disqualified person)?	. No l l
(6) Agree to pay money or property to a government official? (Exception. Check "No"	1 1 1
if the foundation agreed to make a grant to or to employ the official for a period after	_
termination of government service, if terminating within 90 days.)	.」No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b X
Organizations relying on a current notice regarding disaster assistance check here	·└
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	
before the first day of the tax year beginning in 2016?	1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	
defined in section 4942(j)(3) or 4942(j)(5)):	1 1
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	a [
before 2016?	.」NO
If "Yes," list the years	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	(/2 0
•	I/A 2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	
	7
during the year?	7 NO
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	(/2 0
·	I/A 3b V
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • Put the foundation make any investment to a processor (but offer December 31, 1000) that equal paper due to charitable purpose that	4a X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	
had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b X Form 990-PF (2016
	rum 330-PF (2016

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Total number of other employees paid over \$50,000

FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	don Managers, n	igiliy	
3 Five highest-paid independent contractors for professional services. If none, enter			
(a) Name and address of each person paid more than \$50,000	(b) Type (of service	(c) Compensation
ZWJ INVESTMENT COUNSEL, INC 75 14TH STREET NE, SUITE 2900, ATLANTA, GA 30309	INVESTMENT	ADVISORY	53,543.
Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as ti uced, etc.	ne	Expenses
1N/A			
2			
3			
4			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2	 	Amount
1 N/A			7 mount
2			
All other program-related investments. See instructions.			
Total. Add lines 1 through 3		•	0
		Fo	rm 990-PF (2016

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	10,797,962.
b	Average of monthly cash balances	1b	355,248.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	11,153,210.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	11,153,210.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	167,298.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,985,912.
6_	Minimum investment return. Enter 5% of line 5	6	549,296.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	ıd certai	n
1	Minimum investment return from Part X, line 6	1	549,296.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	12,097.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	537,199.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	537,199.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	537,199.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		500 405
а		1a	523,125. 0.
b		1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	[
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	523,125.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment]]	40.005
	income. Enter 1% of Part I, line 27b	5	12,097. 511,028.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies	for the section

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Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				537,199.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				-
		0.	<u> </u>	
3 Excess distributions carryover, if any, to 2016:				E 1. 1. 1. 1. 1.
a From 2011 b From 2012 19,089.				
b From 2012 19,089. c From 2013 1,590.				1 d d d d d d d d d d d d d d d d d d d
dFrom 2014 18, 211.				
eFrom 2015 4,937.				t d d c c c c c c c c c c c c c c c c c
f Total of lines 3a through e	43,827.			
4 Qualifying distributions for 2016 from				 ;
Part XII, line 4: ►\$ 523,125.				1000
a Applied to 2015, but not more than line 2a			0.	4 6 1
b Applied to undistributed income of prior		-		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount		·		523,125.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	14,074.			14,074.
6 Enter the net total of each column as indicated below:				1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	29,753.			{
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				: :
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		•		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.	<u> </u>	
e Undistributed income for 2015. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of		* ** ** **		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			[
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			·
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	29,753.			
10 Analysis of line 9:				
a Excess from 2012 5,015.				
b Excess from 2013 1,590.				
c Excess from 2014 18,211. d Excess from 2015 4,937.	i			
e Excess from 2016			<u> </u>	

623581 11-23-16

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2016)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient ATLANTA COMMUNITY MINISTRIES NONE COMMUNITY DEVELOPMENT 3525 PIEDMONT RD NE BLDG 5 STE 705 ATLANTA, GA 30305 5,000. NONE ÞС ATLANTA CONTACT POINT COMMUNITY EDUCATION 949 DREWRY ST. NE ATLANTA, GA 30306 1,000. ATLANTA HISTORY CENTER NONE ÞС COMMUNITY EDUCATION 130 W PACES FERRY RD NW ATLANTA, GA 30305 2,500. BALAMA DEVELOPMENT NONE PC INTERNATIONAL AID 2107 NORTH DECATUR ROAD, BOX 308 2,000. DECATUR, GA 30033 BIBLE LEAGUE NONE ÞС RELIGIOUS EDUCATION 1 BIBLE LEAGUE PLAZA MATERIAL CRETE, IL 60417 1,000. CAMP TWIN LAKES NONE РC YOUTH DEVELOPMENT 600 MEANS ST, SUITE 110 ATLANTA, GA 30318 5,000. CHILDREN'S HEALTHCARE OF ATLANTA FDTN NONE ÞС COMMUNITY HOSPITAL 1577 NE EXPRESSWAY, SUITE A SUPPORT ATLANTA, GA 30329 2,500. COLUMBIA SEMINARY NONE ₽C EDUCATIONAL 701 S COLUMBIA DR INSTITUTION SUPPORT DECATUR, GA 30031 2,000. COVENANT HOUSE OF GEORGIA NONE þС YOUTH DEVELOPMENT 1559 JOHNSON RD ATLANTA, GA 30318 7,500. CRU NONE ₽C YOUTH DEVELOPMENT 100 LAKE HART DR ORLANDO, FL 32832 3,500. Total from continuation sheets 416,700.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient CWO CHARITIES-COMMUNITY FOUNDATION NONE РC COMMUNITY DEVELOPMENT 44330 PREMIER PLAZA, STE 220 ASHBURN, VA 20147 10,000. DRUID HILLS UNITED METHODIST NONE ÞС YOUTH DEVELOPMENT PRESCHOOL 1200 PONCE DE LEON AVE ATLANTA, GA 30306 50,000. FEED MY STARVING CHILDREN NONE ÞÇ GLOBAL HUNGER REFIEF 401 93RD AVE COON RAPIDS, MN 55433 2,500. FELLOWSHIP OF CHRISTIAN ATHLETES NONE ÞС YOUTH DEVELOPMENT 8701 LEEDS RD KANSAS CITY, MO 64129 60,000. FERNBANK MUSEUM NONE ÞС MUSEUM 767 CLIFTON RD ATLANTA, GA 30307 2,500. FRIENDS OF VIRGIN ISLANDS NONE ÞС NATIONAL PARK SUPPORT P.O. BOX 811 , VI 00831 ST JOHN, 3,500. HIGHLANDS-CASHIERS HOSPITAL NONE ÞС COMMUNITY HOSPITAL POINDATION SUPPORT PO BOX 742 HIGHLANDS, NC 28741 2,000. HIGHLANDS-CASHIERS LAND TRUST NONE РC LAND TRUST 348 S 5TH ST HIGHLANDS, NC 28741 1,500. INT'L ASSN OF YOGA THERAPISTS none ÞС INDUSTRY ASSOCIATION PO BOX 251563 LITTLE ROCK, AK 72225 5,000. INTEGRATIVE RESTORATION INSTITUTE NONE ₽C COMMUNITY DEVELOPMENT 900 5TH AVENUE STE 204 SAN RAFAEL, CA 94901 2,500. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient KELLERMAN FOUNDATION NONE INTERNATIONAL AID 110 ROCKINGHAM DR., SUITE 115 RICHARDSON, TX 75080 4,000. KINSHIP UNITED NONE ÞС INTERNATIONAL AID 5105 TOLLVIEW DRIVE, STE 155 ROLLING MEADOWS, IL 60008 3,000. KRIPALU CENTER FOR YOGA NONE ÞС INDUSTRY ASSOCIATION 57 INTERLAKEN RD STOCKBRIDGE, MA 01262 2,500. LIVABLE BUCKHEAD NONE PC COMMUNITY DEVELOPMENT 3340 PEACHTREE ROAD, SUITE 1640 ATLANTA, GA 30326 2,500. MIS ANNUAL FUND NONE ÞС COMMUNITY DEVELOPMENT 1575 SHERIDAN RD NE ATLANTA, GA 30324 5,000. NATIONAL PRO-LIFE ALLIANCE NONE PC INDUSTRY ASSOCIATION 5211 PORT ROYAL RD, SUITE 500 SPRINGFIELD, VA 22151 2,000. NATIONAL FEDERATION OF THE BLIND NONE ÞC HEALTHCARE SUPPORT 200 EAST WELLS STREET BALTIMORE, MD 21230 1,000. ORCHARD NONE ₽C COMMUNITY DEVELOPMENT 3625 PIEDMONT, BLDG. 5, SUITE 705 ATLANTA, GA 30305 3,000. OUR HOUSE NONE ₽C HOMELESS SHELTER 173 BOULEVARD NE ATLANTA, GA 30312 2,000. PEACHTREE PRESBYTERIAN NONE ₽C CHURCH OPERATING 3434 ROSWELL RD BUDGET ATLANTA, GA 30305 72,200. Total from continuation sheets

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager Purpose of grant or contribution Foundation Amount status of Name and address (home or business) or substantial contributor recipient PRESBYTERIAN COLLEGE NONE ÞС EDUCATIONAL 503 S BROAD ST INSTITUTION SUPPORT CLINTON, SC 29325 55,000. NONE PRESBYTERIAN HERITAGE CENTER ÞС CHURCH MUSEUM SUPPORT PO BOX 207 MONTREAT, NC 28757 1,000. PRESBYTERIAN HOMES OF GEORGIA NONE ₽C ELDER CARE SUPPORT 301 E SCREVEN ST QUITMAN, GA 31643 3,500. SHEPHERD CENTER NONE ÞС COMMUNITY HOSPITAL 2020 PEACHTREE RD SUPPORT ATLANTA, GA 30309 2,500. NONE ST JUDE'S RESEARCH HOSPITAL PC COMMUNITY HOSPITAL 501 ST JUDE PL SUPPORT MEMPHIS, TN 38105 5,000. STATE YMCA OF GEORGIA NONE ÞС YOUTH DEVELOPMENT PO BOX 820 MCDONOUGH, GA 30253 37,500. NONE THE BASCOM ÞС MUSEUM 323 FRANKLIN RD HIGHLANDS, NC 28741 2,500. THE GIVE BACK YOGA FOUNDATION NONE ÞС INDUSTRY ASSOCIATION 900 BASELINE RD BOULDER, CO 80302 5,000. THE LITERACY COUNCIL OF HIGHLANDS NONE ÞC COMMUNITY LITERACY SUPPORT PO BOX 2320 HIGHLANDS, NC 28741 5,000. NONE THORNWELL HOME FOR CHILDREN ÞС YOUTH DEVELOPMENT 302 S BROAD ST CLINTON, SC 29325 1,000. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient UNITED WAY NONE PС VARIOUS COMMUNITY 100 EDGEWOOD AVE CHARITIES ATLANTA, GA 30303 25,000. NONE UNIVERSITY OF GEORGIA FOUNDATION ₽C CAPITAL CAMPAIGN AND 394 SOUTH MILLEDGE AVE, SUITE 100 ANNUAL FUND ATHENS, GA 30602 3,000. YOGA SERVICE COUNCIL NONE РC INDUSTRY ASSOCIATION P.O. BOX 8238 ATLANTA, GA 31106 2,000. Total from continuation sheets

Page 11

Part XV Supplementary Informati	`			
3 Grants and Contributions Paid During the	e Year or Approved for Future If recipient is an individual,	Payment		
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year				
ACCESSIBLE YOGA 1125 VALENCIA ST, BLDG A	NONE	₽C	INDUSTRY ASSOCIATION	
SAN FRANCISCO, CA 94110		ļ		2,85
ALPHA SIGMA PHI FOUNDATION	NONE	₽C	YOUTH DEVELOPMENT	
710 ADAMS ST			100111 221220111211	
CARMEL, IN 46032				35,000
AMERICAN RED CROSS 1955 MONROE DR	NONE	PC	GLOBAL CATASTROPHE RELIEP	
ATLANTA, GA 30324	Ì			15,000
ATLANTA AREA COUNCIL, BSA 1800 CIRCLE 75 PKWY	NONE	₽C	YOUTH DEVELOPMENT	
ATLANTA, GA 30339			-	50,000
ATLANTA BOTANICAL GARDEN 1345 PIEDMONT AVE, NE	NONE	PC	COMMUNITY EDUCATION	
ATLANTA, GA 30309 Total SEE C	ONTINUATION SHE	<u> </u> ፑጥ/ፍነ	_ ▶ 3a	2,000 521,550
b Approved for future payment	, on the part of the		54	321,330
NONE				
			1	
		 		
			}	
		_L	> 3b	
				rm 990-PF (201

gross amounts unless otherwise indicated. rogram service revenue:	(a) Business	business income	Exclude	d by section 512, 513, or 514	(4)
	Business	(b) Amount	Exclu- sion code	(d) Amount	(e) Related or exempt function income
	Code		Code		
	-		-}}-		
	·				
	·				
	- }				·
	·				
Fees and contracts from government agencies					
Fees and contracts from government agencies lembership dues and assessments	 		++		
ternuership dues and assessments hterest on savings and temporary cash			+-+		
_]] }	Ì	
ivestments ividends and interest from securities			14	268,573.	
	 		- - -	200,373.	
et rental income or (loss) from real estate:	 		┵		
Debt-financed property	-				
Not debt-financed property	 +				
et rental income or (loss) from personal	1		1 1	1	
roperty	 				
ther investment income	}				
ain or (loss) from sales of assets other			1 1 0	766 707	
nan inventory			18	766,797.	
et income or (loss) from special events	 				
ross profit or (loss) from sales of inventory			++		
other revenue:	1			Ì	
· ————————————————————————————————————	-				
·	-				
	- 		-1 -1		
	-	 	+-4		
	-) 	1,035,370.	
subtotal. Add columns (b), (d), and (e)	<u> </u>		· · · · · ·		1,035,3
otal. Add line 12, columns (b), (d), and (e)				. 13	1,033,3
worksheet in line 13 instructions to verify calculations.)					
rt XVI-B Relationship of Activities	to the Acco	mplishment of	Exempt	Purposes	
e No. Explain below how each activity for which inc	come is reported in	column (a) of Part VV	I A contribu	tod importantly to the secome	lighment of
				ted importantly to the accomp	mannent of
the foundation's exempt purposes (other tha	n by providing rai				
					
1					
					
					

623621 11-23-16

(5) Loans or loan guarantees

(6) Performance of services or membership or fundraising solicitations

1b(6)

Par	t XVII Information Regarding Transfers To and Transactions and Relationships With None Exempt Organizations	charitable		.90 10
1 [Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	No
t	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
((1) Cash	1a(1)	-	X
((2) Other assets	1a(2)		X
b (Other transactions:			
((1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1h(4)		X

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

		Outer assets, or services received				
(a)Line no	(b) Amount involved	(c) Name of noncharitat	ole exempt organization	(d) Description	of transfers, transaction	s, and sharing arrangements
		N/A				
		<u></u> _		<u> </u>		
		<u> </u>	_ 	_ <u></u>		
	<u> </u>	<u> </u>				
						
	<u> </u>			 		
	 	 				
	J	<u> </u>		ــــــــــــــــــــــــــــــــــــــ		
	-	ctly affiliated with, or related to, or	· -	zations described		Г., Б е.,
	• • • • • • • • • • • • • • • • • • • •	er than section 501(c)(3)) or in se	ection 52/?			Yes X No
b_lf "Y	es," complete the following sch		(b) Type of average to a		(a) December of col	-A
	(a) Name of or	ganization	(b) Type of organization		(c) Description of rel	auonsnip
	N/A					
						
						
	Linder penalties of periury I declare	that I have examined this return, inclu-	ding accompanying schedules and	statements and to the	host of my knowledge	
Sian		emplote Declaration of preparer (other t				May the IHS discuss this return with the preparer
Sign Here	L L S O	South TE	1 1/1/2	PRESID	NE NIM	shown below (see instr)?
	Signature of officer or truster	gamu III	Date	Title	JEN 1	_ L& Yes L No
	Print/Type preparer's n				Check if	PTIN
	i illib i ypc picpaici a il	ame i reparer s	o signaturo	1	self- employed	1 1111
Paid	CARLYE W.	DOOLEY CARLY	E W. DOOLEY	11/06/17	Jon Gripioyed	P00292964
Prepa		NDHAM BRANNON,		<u> </u>	Firm's EIN > 5	3-1763439
Use C		ibinal Dividion,	1.0.		TIBLISE IN P 30	J 1/03437
		30 PEACHTREE R	D. NE SUITE	600	 	
	1	,		1		

Form **990-PF** (2016)

Phone no. 404-898-2000

ATLANTA, GA 30326

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

Organization type (check one).

THE LASSITER FAMILY CHARITABLE FOUNDATION

Employer identification number

46-1402786

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	·
• •	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.
General Rule	
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the intions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.
year, contributions is checked, enter l purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box nere the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year
•	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE LASSITER FAMILY CHARITABLE FOUNDATION

Employer identification number

46-1402786

Part I	Contributors (See instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	E.G. AND MARIANNE LASSITER 3750 N. STRATFORD RD. ATLANTA, GA 30342	\$\$ \$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-		\$Schedule B (Form	Person Payroll Complete Part II for noncash contributions 990, 990-EZ, or 990-PF) (2016

Name of organization

46-1402786

Employer identification number

THE LASSITER FAMILY CHARITABLE FOUNDATION

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	2,406 SHARES OF UNITED HEALTH COMMON STOCK		
		\$ 382,398.	12/09/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
23453 10-1	8-16	\$ Schedule B (Form 9	90, 990-EZ, or 990-PF) (2

Name of organ	nization		Employer identification number
	SSITER FAMILY CHARITAB	LE	
FOUNDA'	rion		46-1402786
Part III 🎋	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete c	ibutions to organizations described in	section 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,000 or les	ss for the year (Enter this info once) \$
	Use duplicate copies of Part III if additional		
(a) No. from	(b) Purpose of gift	(a) I lea of mift	(d) Description of how wift is hold
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	[
].			
<u> </u>			<u></u>
1		(e) Transfer of gift	
1			
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
ļ -			
-			
] -			
(a) No			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
·			
	 		_
-		(e) Transfer of gift	
1		(o, transfer of gift	
1	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
1.			
} ·			
(a) No. from	(In) Duran and off	(a) Han at with	(d) December of house of the head
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Ì.			_ }
	 	_ 	
╽.			
<u> </u>			_ <u></u>
1		(e) Transfer of gift	
1			
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
j.		·	
) ·			
} .			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- Faili			
] ·			-
-			
		(e) Transfer of gift	
		(-)anoide of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
F			
1.			
1.			
623454 10-18-1			Schedule B (Form 990, 990-EZ, or 990-PF) (2016

FORM 990)-PF G.	AIN OR (LOSS) F	ROM SALE	OF	ASSETS		STA	TEMENT	1
DESCRIP T	(A) PION OF PROPERTY			7	MANNER ACQUIRED	DA' ACQU		DATE S	OLE
PUBLICLY	TRADED SECURIT	IES				VARI	ous	06/30	/17
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	s
	434,423.	304,638.		0.	•	0.		129,7	85.
DESCRIPT	(A) TION OF PROPERTY			1	MANNER ACQUIRED	DA ^c		DATE S	OLD
PUBLICLY	Y TRADED SECURIT	_ IES				VARI	OUS	06/30	/17
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	S
_	3,285,322.	2,664,985.		0 .	•	0.		620,3	37.
(A) DESCRIPTION OF PROPERTY		_		7	MANNER ACQUIRED	DA ACQU		DATE S	OLD
CONTRIBU	JTED STOCK					12/0	9/16	03/22	/17
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	s
_	399,073.	382,398.		0		0.		16,6	75.
CAPITAL	GAINS DIVIDENDS	FROM PART IV							0.
TOTAL TO	O FORM 990-PF, P	ART I, LINE 6A				•		766,7	97.

FORM 990-PF	DIVIDENDS	S AND INTERI	EST FROM SECUR	ITIES ST	'ATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
CHARLES SCHWAB DIV & INT	268,573		268,573.	268,573.	268,573.	
TO PART I, LINE 4	268,573	. (268,573.	268,573.	268,573.	
FORM 990-PF		ACCOUNTI	NG FEES	rz	'АТЕМЕНТ 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAX PREP FEES		3,150.	1,575.	0.	1,575.	
TO FORM 990-PF, PG	1, LN 16B ==	3,150.	1,575.	0.	1,575.	
FORM 990-PF	Oʻ	THER PROFES	SIONAL FEES	SI	CATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMEN	NT FEES	53,543.	53,543.	0.	0.	
TO FORM 990-PF, PG	1, LN 16C	53,543.	53,543.	0.	0.	
FORM 990-PF		TAX	ES	ST	ATEMENT 5	
FORM 990-PF DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	ATEMENT 5 (D) CHARITABLE PURPOSES	
	_	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	

FORM 990-PF	OTHER EXPENSES					STATEMENT	
DESCRIPTION	(A) EXPENS PER BO	SES		(B) (C) T INVEST- ADJUSTEI NT INCOME NET INCOM			TABLE
MISCELLANEOUS EXPENSES		102.		102.		0.	0.
TO FORM 990-PF, PG 1, LN 23		102.		102.		0. 0	
FORM 990-PF U.S. AND S	STATE/C	TY G	OVERNMENT	OBLI	GATIONS	STATEMENT	r 7
DESCRIPTION		U.S GOV'		вос	OK VALUE	FAIR MARI VALUE	KET
CHARLES SCHWAB SEE STATEMENT ATTACHED	A	Х		-	0.		0.
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS						
TOTAL STATE AND MUNICIPAL GOV	ERNMEN'	r OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART II	I, LINE	10A			0.		0.
FORM 990-PF	CORI	PORAT	E STOCK	 _		STATEMEN'	т 8
DESCRIPTION				вос	OK VALUE	FAIR MAR	KET
CHARLES SCHWAB SEE STATEMENT	A ATTA	CHED		8	3,528,888.	9,803	,123.
TOTAL TO FORM 990-PF, PART I	I, LINE	10B			3,528,888.	9,803	,123.
FORM 990-PF	COR	PORAT	E BONDS			STATEMEN'	т 9
DESCRIPTION				вос	OK VALUE	FAIR MAR	KET
DESCRIPTION CHARLES SCHWAB SEE STATEMENT	A ATTA	CHED			OK VALUE		

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 10

NAME OF MANAGER

E.G. LASSITER, III MARIANNE B. LASSITER